Approved for use through 7/31/2008. OMB 0661-0032
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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number Substitute for Form PTO-875 693736 CLAIMS AS FILED - PART I (Column 1) OTHER THAN (Column 2) SMALL ENTITY QR SMACL ENTITY FOR NUMBER FILED BASIO FEE (37 CFR 1.18(a)) NUMBER EXTRA RATE RATE FEE TOTAL CLAIMS (37 CFR 1.16(c)) OR minus 20 = INDEPENDENT CLAIMS (37 CFR 1.16(b)) OR minus 3 = MULTIPLE DEPENDENT CLAIM PRESENT ÖR (37 CFR 1.16(d)). ! If the difference in column 1 is less than zero, enter "0" in column 2. OR TOTAL OR TOTAL CLAIMS AS AMENDED - PART II (Column i) (Column 2) (Column 3) OTHER THAN SMALL ENTITY CLAIMS OR HIGHEST SMALL ENTITY REMAINING PRESENT ENDMENT NUMBER AFTER RATE PREVIOUSLY ADDI: EXTRA AMENOMENT ADOI. PAID FOR TIONAL Total (37 ÇFR 1.16(c)) **WHO!** Minus FEE FEE Independent (37 CFR 1.16(b)) Minus FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR OR 1.1 TOTAL ADD'L FEE TOTAL .OR ADD'L FEE (Column 1) (Column 2) (Column, 3) CLAIMS HIGHEST REMAINING FNAI NUMBER PRESENT AETER RATE ADDI. PREVIOUSLY RATE IOOA TIONAL Total PAID FOR AMENDM TIONAL FEE Minus Minus FIRST PRESENTATION OF MULTIPLE DEPENDENT GLAIM (37 CFR 1.15(d)) OB · OR TOTAL ADD'L FEE TOTAL OR ADD'L FEE. (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING ENT PRESENT NUMBER AFTER AMENDMENT RATE ADDI-REVIOUSLY EXTRA RATE ADDI - . TIONAL PAID FOR (37 CFR 1.16(c)) TIONÁL Minus-FEE AMEND FEE Independent X 1 -Minus OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) ÒR X ş OR. TOTAL If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL. ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "U in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. ADD'L FEE

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the public which i including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Conumerce, P.O. Box 1450, Alexandria, VA 22313, 1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS